

Many people who come to our office say that they had a difficult time locating a physician in this area who practices alternative medicine.

In an effort to find out how best to let people know about our office and the services that exist, we ask that you fill out this brief questionnaire fully. Thank you for your help.

HOW DID YOU HEAR ABOUT OUR OFFICE?

Referral from a friend, co-worker or relative

Friend's Name: _____ Relationship: _____

Referral from a doctor Doctor's Name: _____

Specialty: Nutritionist Psychotherapist
 Podiatrist Health/Life coach
 Chiropractor Dentist

Referral from a gym Name: _____

Referral from a health food store Name: _____

Yellow Pages Book Used (Bergen, Passaic, etc) _____

Category Searched: Holistic Center Nutrition Physicians

New Jersey Naturally Category Searched: Holistic Center Chelation Therapy
 Physicians Other

Internet

Dr. Leder's Website

Organization Website

ACAM AHMA A4M AAEM ICIM Arthritis Trust

Laboratory Website

Spectracell

IMMUNO Lab

Neuroscience

Meta Matrix

Genova

Other Site: _____

Radio advertisement

Other: _____